

Type a plus sign (+) inside this box → ☐



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Rev. 6/95

U.S. Department of Commerce
Patent and Trademark Office

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing

Attorney Docket
Number

H 3763 PCT/US

First Named
Inventor

KROPF, Christian

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FINE SUSPENSIONS OF POORLY SOLUBLE CALCIUM SALTS AND THEIR USE IN DENTAL CARE PRODUCTS

(Title of the invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

12/19/1999

as United States Application Number or PCT International

Application Number **PCT/EP99/09683**

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? YES NO |
|-------------------------------------|---------|----------------------------------|--------------------------|--|
| 198 58 662.0 | Germany | 12/18/1998 | <input type="checkbox"/> | <input type="checkbox"/> <input checked="" type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> |
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| | | | <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | Additional provisional application numbers are listed on a supplemental priority sheet attached hereto. |
|-----------------------|--------------------------|---|
| | | <input type="checkbox"/> |

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

AUG 15 2001

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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Rev. 6/95

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Patent and Trademark Office

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

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KROPF, Christian

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the specification of which

(Title of the invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 12/19/1999 as United States Application Number or PCT International

Application Number PCT/EP99/09683 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §385(b) of any foreign application(s) for patent or inventor's certificate, or §385(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? YES NO |
|-------------------------------------|---------|----------------------------------|--------------------------|-------------------------------------|
| 198 58 662.0 | Germany | 12/18/1998 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | Additional provisional application numbers are listed on a supplemental priority sheet attached hereto. |
|-----------------------|--------------------------|---|
| | | <input type="checkbox"/> |

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DECLARATION

Page 2

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

| U.S. Parent Application Number | PCT Parent Number | Parent Filing Date (MM/DD/YYYY) | Parent Patent Number (if applicable) |
|--------------------------------|-------------------|---------------------------------|--------------------------------------|
| | PCT/EP99/09683 | 12/09/1999 | |

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name Customer Number or label
OR
☒ List Attorney(s) and/or agent(s) name and registration number below:

| Name | Registration Number | Name | Registration Number |
|---------------------------------------|---------------------|---|---------------------|
| Wayne C. Jaeschke Kimberly R. Hild | 21,062 39,224 | Glenn E. J. Murphy Stephen D. Harper | 33,539 33,243 |

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number or label 00423 OR ☐ Fill in correspondence address below

| | | | |
|---------|--|-----------|--------------|
| Name | Glenn E. J. Murphy | | |
| Address | Henkel Corporation - Patent Department | | |
| Address | 2500 Renaissance Boulevard, Suite 200 | | |
| City | Gulph Mills | State | PA |
| Country | USA | Telephone | 610-278-4926 |
| | | Fax | 610-278-6548 |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| | | | |
|---------------------------------|--------------------|---|---------|
| Name of Sole or First Inventor: | | <input type="checkbox"/> A petition has been filed for this | |
| Given Name | Christian | Middle Initial | |
| | | Family Name | KROPP |
| | | Suffix e.g. Jr. | |
| Inventor's Signature | | | Date |
| Residence: City | Duesseldorf | State | |
| | | Country | Germany |
| | | Citizenship | Germany |
| Post Office Address | Caecilienstrasse 4 | | |
| Post Office Address | | | |
| City | 40597 Duesseldorf | State | |
| | | Zip | |
| | | Country | Germany |
| | | Applicant Authority | |

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

| | | | | | | | |
|------------|--------------|----------------|--|-------------|---------------------|-----------------|--|
| Given Name | Ulrik | Middle Initial | | Family Name | BRUENINGHAUS | Suffix e.g. Jr. | |
|------------|--------------|----------------|--|-------------|---------------------|-----------------|--|

| | | | |
|----------------------|--|------|--|
| Inventor's Signature | | Date | |
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| | | | | | | | |
|-----------------|----------------|-------|--|---------|----------------|-------------|----------------|
| Residence: City | Monheim | State | | Country | Germany | Citizenship | Germany |
|-----------------|----------------|-------|--|---------|----------------|-------------|----------------|

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| Post Office Address | An der Dorfstr. 6 |
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| Post Office Address | |
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|------|----------------------|-------|--|-----|--|---------|----------------|---------------------|--|
| City | 40789 Monheim | State | | Zip | | Country | Germany | Applicant Authority | |
|------|----------------------|-------|--|-----|--|---------|----------------|---------------------|--|

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

| | | | | | | | |
|------------|----------------|----------------|--|-------------|----------------|-----------------|--|
| Given Name | Amergio | Middle Initial | | Family Name | PASTURA | Suffix e.g. Jr. | |
|------------|----------------|----------------|--|-------------|----------------|-----------------|--|

| | | | |
|----------------------|--|------|--|
| Inventor's Signature | | Date | |
|----------------------|--|------|--|

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|-----------------|---------------|-------|--|---------|----------------|-------------|----------------|
| Residence: City | Witten | State | | Country | Germany | Citizenship | Germany |
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| Post Office Address | Sauerbruchstr. 3a |
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|------|---------------------|-------|--|-----|--|---------|----------------|---------------------|--|
| City | 58453 Witten | State | | Zip | | Country | Germany | Applicant Authority | |
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Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

| | | | | | | | |
|------------|----------------|----------------|--|-------------|-----------------|-----------------|--|
| Given Name | Michael | Middle Initial | | Family Name | MEINDERS | Suffix e.g. Jr. | |
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|----------------------|--|------|--|
| Inventor's Signature | | Date | |
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|-----------------|----------------|-------|--|---------|----------------|-------------|----------------|
| Residence: City | Krefeld | State | | Country | Germany | Citizenship | Germany |
|-----------------|----------------|-------|--|---------|----------------|-------------|----------------|

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| Post Office Address | Am Eickerhof 11 |
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| Post Office Address | |
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|------|----------------------|-------|--|-----|--|---------|----------------|---------------------|--|
| City | 47800 Krefeld | State | | Zip | | Country | Germany | Applicant Authority | |
|------|----------------------|-------|--|-----|--|---------|----------------|---------------------|--|

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

| | | | | | | | |
|------------|--------------|----------------|--|-------------|------------------|-----------------|--|
| Given Name | Peter | Middle Initial | | Family Name | WUELKNITZ | Suffix e.g. Jr. | |
|------------|--------------|----------------|--|-------------|------------------|-----------------|--|

| | | | |
|----------------------|--|------|--|
| Inventor's Signature | | Date | |
|----------------------|--|------|--|

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|-----------------|--------------------|-------|--|---------|----------------|-------------|----------------|
| Residence: City | Leichlingen | State | | Country | Germany | Citizenship | Germany |
|-----------------|--------------------|-------|--|---------|----------------|-------------|----------------|

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| Post Office Address | Im Erlengrund 9 |
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| Post Office Address | |
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|------|--------------------------|-------|--|-----|--|---------|----------------|---------------------|--|
| City | 42799 Leichlingen | State | | Zip | | Country | Germany | Applicant Authority | |
|------|--------------------------|-------|--|-----|--|---------|----------------|---------------------|--|

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

Type a plus sign (+) inside this box — ☐

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? YES NO |
|-------------------------------------|---------|----------------------------------|--------------------------|---|
| 198 58 662.0 | Germany | 12/18/1998 | <input type="checkbox"/> | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> YES <input type="checkbox"/> NO |

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | Additional provisional application numbers are listed on a supplemental priority sheet attached hereto. |
|-----------------------|--------------------------|---|
| | | <input type="checkbox"/> |

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DECLARATION

Page 2

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| U.S. Parent Application Number | PCT Parent Number | Parent Filing Date (MM/DD/YYYY) | Parent Patent Number (if applicable) |
|--------------------------------|-------------------|---------------------------------|--------------------------------------|
| | PCT/EP99/09683 | 12/09/1999 | |

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| <input type="checkbox"/> Firm Name | | Customer Number or label | |
|--|---------------------|--------------------------|---------------------|
| OR | | | |
| <input checked="" type="checkbox"/> List Attorney(s) and/or agent(s) name and registration number below: | | | |
| Name | Registration Number | Name | Registration Number |
| Wayne C. Jaeschke | 21,062 | Glenn E. J. Murphy | 33,539 |
| Kimberly R. Hild | 39,224 | Stephen D. Harper | 33,243 |

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

| | | | | | |
|--------------------------------------|--|--|--------------|-----|---|
| Please direct all correspondence to: | | <input checked="" type="checkbox"/> Customer Number or label | 00423 | OR | <input type="checkbox"/> Fill in correspondence address below |
| Name | Glenn E. J. Murphy | | | | |
| Address | Henkel Corporation - Patent Department | | | | |
| Address | 2500 Renaissance Boulevard, Suite 200 | | | | |
| City | Gulph Mills | State | PA | ZIP | 19406 |
| Country | USA | Telephone | 610-278-4926 | Fax | 610-278-6548 |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| | | | | | | | |
|---|--------------------|---|--|-------------|---------|---------------------|---------|
| Name of Sole or First Inventor: | | <input type="checkbox"/> A petition has been filed for this | | | | | |
| Given Name | Christian | Middle Initial | | Family Name | KROPP | Suffix e.g. Jr. | |
| Inventor's Signature | | | | | Date | | |
| Residence: City | Duesseldorf | State | | Country | Germany | Citizenship | Germany |
| Post Office Address | Caecilienstrasse 4 | | | | | | |
| Post Office Address | | | | | | | |
| City | 40597 Duesseldorf | State | | Zip | | Country | Germany |
| | | | | | | Applicant Authority | |
| <input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto | | | | | | | |

DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:

☐

A petition has been filed for this unsigned inventor

| | | | | | | | |
|------------|---------------|----------------|--|-------------|---------------------|-----------------|--|
| Given Name | Ulrike | Middle Initial | | Family Name | BRUENINGHAUS | Suffix e.g. Jr. | |
|------------|---------------|----------------|--|-------------|---------------------|-----------------|--|

| | | | |
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| Inventor's Signature | | Date | |
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|-----------------|----------------|-------|--|---------|----------------|-------------|----------------|
| Residence: City | Monheim | State | | Country | Germany | Citizenship | Germany |
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| Post Office Address | An der Dorfstr. 6 |
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|------|----------------------|-------|--|-----|--|---------|----------------|---------------------|--|
| City | 40789 Monheim | State | | Zip | | Country | Germany | Applicant Authority | |
|------|----------------------|-------|--|-----|--|---------|----------------|---------------------|--|

Name of Additional Joint Inventor, if any:

☐

A petition has been filed for this unsigned inventor

| | | | | | | | |
|------------|----------------|----------------|--|-------------|----------------|-----------------|--|
| Given Name | Amergio | Middle Initial | | Family Name | PASTURA | Suffix e.g. Jr. | |
|------------|----------------|----------------|--|-------------|----------------|-----------------|--|

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| Inventor's Signature | | Date | |
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|-----------------|---------------|-------|--|---------|----------------|-------------|----------------|
| Residence: City | Witten | State | | Country | Germany | Citizenship | Germany |
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| Post Office Address | Sauerbruchstr. 3a |
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|------|---------------------|-------|--|-----|--|---------|----------------|---------------------|--|
| City | 58453 Witten | State | | Zip | | Country | Germany | Applicant Authority | |
|------|---------------------|-------|--|-----|--|---------|----------------|---------------------|--|

Name of Additional Joint Inventor, if any:

☐

A petition has been filed for this unsigned inventor

| | | | | | | | |
|------------|----------------|----------------|--|-------------|-----------------|-----------------|--|
| Given Name | Michael | Middle Initial | | Family Name | MEINDERS | Suffix e.g. Jr. | |
|------------|----------------|----------------|--|-------------|-----------------|-----------------|--|

| | | | |
|----------------------|--|------|--|
| Inventor's Signature | | Date | |
|----------------------|--|------|--|

| | | | | | | | |
|-----------------|----------------|-------|--|---------|----------------|-------------|----------------|
| Residence: City | Krefeld | State | | Country | Germany | Citizenship | Germany |
|-----------------|----------------|-------|--|---------|----------------|-------------|----------------|

| | |
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| Post Office Address | Am Eickerhof 11 |
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| Post Office Address | |
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|------|----------------------|-------|--|-----|--|---------|----------------|---------------------|--|
| City | 47800 Krefeld | State | | Zip | | Country | Germany | Applicant Authority | |
|------|----------------------|-------|--|-----|--|---------|----------------|---------------------|--|

Name of Additional Joint Inventor, if any:

☐

A petition has been filed for this unsigned inventor

| | | | | | | | |
|------------|--------------|----------------|--|-------------|------------------|-----------------|--|
| Given Name | Peter | Middle Initial | | Family Name | WUELKNITZ | Suffix e.g. Jr. | |
|------------|--------------|----------------|--|-------------|------------------|-----------------|--|

| | | | |
|----------------------|--|------|--|
| Inventor's Signature | | Date | |
|----------------------|--|------|--|

| | | | | | | | |
|-----------------|--------------------|-------|--|---------|----------------|-------------|----------------|
| Residence: City | Leichlingen | State | | Country | Germany | Citizenship | Germany |
|-----------------|--------------------|-------|--|---------|----------------|-------------|----------------|

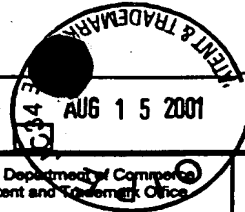
| | |
|---------------------|------------------------|
| Post Office Address | Im Erlengrund 9 |
|---------------------|------------------------|

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| Post Office Address | |
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|------|--------------------------|-------|--|-----|--|---------|----------------|---------------------|--|
| City | 42799 Leichlingen | State | | Zip | | Country | Germany | Applicant Authority | |
|------|--------------------------|-------|--|-----|--|---------|----------------|---------------------|--|

☒

Additional inventors are being named on supplemental sheet(s) attached hereto



Type a plus sign (+) inside this box →

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(Title of the Invention)

☐ is attached hereto

OR

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Application Number

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(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? YES NO |
|-------------------------------------|---------|----------------------------------|--------------------------|--|
| 198 58 662.0 | Germany | 12/18/1998 | <input type="checkbox"/> | <input type="checkbox"/> <input checked="" type="checkbox"/> |
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☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | Additional provisional application numbers are listed on a supplemental priority sheet attached hereto. |
|-----------------------|--------------------------|---|
| | | <input type="checkbox"/> |

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION**ADDITIONAL INVENTOR(S)**
Suppl m ntal Sheet

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

| | | | | | | | |
|------------|-------------|----------------|--|-------------|-------------------|-----------------|--|
| Given Name | Rolf | Middle Initial | | Family Name | HEMPELMANN | Suffix e.g. Jr. | |
|------------|-------------|----------------|--|-------------|-------------------|-----------------|--|

| | | | |
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| Inventor's Signature | | Date | |
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| | | | | | | | |
|-----------------|--------------------|-------|--|---------|----------------|-------------|----------------|
| Residence: City | St. Ingbert | State | | Country | Germany | Citizenship | Germany |
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| Post Office Address | St. Herblainer Str. 11 |
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|------|--------------------------|-------|--|-----|--|---------|----------------|---------------------|--|
| City | 66386 St. Ingbert | State | | Zip | | Country | Germany | Applicant Authority | |
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Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

| | | | | | | | |
|------------|---------------|----------------|--|-------------|-------------|-----------------|--|
| Given Name | Marcel | Middle Initial | | Family Name | ROTH | Suffix e.g. Jr. | |
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| | | | |
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| Inventor's Signature | | Date | |
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|-----------------|--------------------|-------|--|---------|----------------|-------------|----------------|
| Residence: City | Duesseldorf | State | | Country | Germany | Citizenship | Germany |
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| Post Office Address | Weststrasse 17 |
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|------|--------------------------|-------|--|-----|--|---------|----------------|---------------------|--|
| City | 40597 Duesseldorf | State | | Zip | | Country | Germany | Applicant Authority | |
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Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

| | | | | | | | |
|------------|--|----------------|--|-------------|--|-----------------|--|
| Given Name | | Middle Initial | | Family Name | | Suffix e.g. Jr. | |
|------------|--|----------------|--|-------------|--|-----------------|--|

| | | | |
|----------------------|--|------|--|
| Inventor's Signature | | Date | |
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| City | | State | | Zip | | Country | | Applicant Authority | |
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Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

| | | | | | | | |
|------------|--|----------------|--|-------------|--|-----------------|--|
| Given Name | | Middle Initial | | Family Name | | Suffix e.g. Jr. | |
|------------|--|----------------|--|-------------|--|-----------------|--|

| | | | |
|----------------------|--|------|--|
| Inventor's Signature | | Date | |
|----------------------|--|------|--|

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| Residence: City | | State | | Country | | Citizenship | |
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| City | | State | | Zip | | Country | | Applicant Authority | |
|------|--|-------|--|-----|--|---------|--|---------------------|--|

☐ Additional inventors are being named on supplemental sheet(s) attached hereto

DECLARATION

Page 2

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

| U.S. Parent Application Number | PCT Parent Number | Parent Filing Dat (MM/DD/YYYY) | Parent Patent Number (if applicable) |
|--------------------------------|-------------------|--------------------------------|--------------------------------------|
| | PCT/EP99/09683 | 12/09/1999 | |

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name Customer Number or label
OR
☒ List Attorney(s) and/or agent(s) name and registration number below:

| Name | Registration Number | Name | Registration Number |
|-------------------|---------------------|--------------------|---------------------|
| Wayne C. Jaeschke | 21,062 | Glenn E. J. Murphy | 33,539 |
| Kimberly R. Hild | 39,224 | Stephen D. Harper | 33,243 |

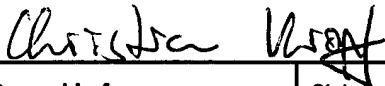
☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number ☐ or label 00423 OR ☐ Fill in correspondence address below

| | | | |
|---------|--|-----------|--------------|
| Name | Glenn E. J. Murphy | | |
| Address | Henkel Corporation - Patent Department | | |
| Address | 2500 Renaissance Boulevard, Suite 200 | | |
| City | Gulph Mills | State | PA |
| Country | USA | Telephone | 610-278-4926 |
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this

| | | | | | | | |
|----------------------|---|----------------|--|-------------|---------|---------------------|---------|
| Given Name | Christian | Middle Initial | | Family Name | KROPF | Suffix e.g. Jr. | |
| Inventor's Signature |  | | | | Date | August 1, 2001 | |
| Residence: City | Duesseldorf | State | | Country | Germany | Citizenship | Germany |
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| City | 40597 Duesseldorf | State | | Zip | | Country | Germany |
| | | | | | | Applicant Authority | |

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventorGiven
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InitialFamily
NameMEINDERSSuffix
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SignatureMichael Meinders

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Authority

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☐ A petition has been filed for this unsigned inventorGiven
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NameWUELKNITZSuffix
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SignaturePeter Wuelknitz

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Authority☒

Additional inventors are being named on supplemental sheet(s) attached hereto

DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:

☐

A petition has been filed for this unsigned inventor

Given
Name**Rolf**Middle
InitialFamily
Name**HEMPELMANN**Suffix
e.g. Jr.Inventor's
Signature*Rolf Hempel*

Date

*August 1, 2001*Residence:
City**St. Ingbert***DEX*

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Country

GermanyApplicant
Authority

Name of Additional Joint Inventor, if any:

☐

A petition has been filed for this unsigned inventor

Given
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Name**ROTH**Suffix
e.g. Jr.Inventor's
Signature

Date

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Name of Additional Joint Inventor, if any:

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A petition has been filed for this unsigned inventor

Given
NameMiddle
InitialFamily
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Signature

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Residence:
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Country

Applicant
Authority

Name of Additional Joint Inventor, if any:

☐

A petition has been filed for this unsigned inventor

Given
NameMiddle
InitialFamily
NameSuffix
e.g. Jr.Inventor's
Signature

Date

Residence:
City

State

Country

Citizenship

Post Office Address

Post Office Address

City

State

Zip

Country

Applicant
Authority☐

Additional inventors are being named on supplemental sheet(s) attached hereto

DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:



A petition has been filed for this unsigned inventor

| | | | | | | | |
|----------------------|-------------------------------|----------------|--|-------------|-------------------|---------------------|----------------|
| Given Name | Rolf | Middle Initial | | Family Name | HEMPELMANN | Suffix e.g. Jr. | |
| Inventor's Signature | | | | | | Date | |
| Residence: City | St. Ingbert | State | | Country | Germany | Citizenship | Germany |
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| | | | | | | Applicant Authority | |

Name of Additional Joint Inventor, if any:



A petition has been filed for this unsigned inventor

| | | | | | | | |
|----------------------|--------------------------|----------------|--|-------------|----------------|---------------------|-----------------------|
| Given Name | Marcel | Middle Initial | | Family Name | ROTH | Suffix e.g. Jr. | |
| Inventor's Signature | <i>Marcel R.</i> | | | | | Date | August 1, 2001 |
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| Post Office Address | | | | | | | |
| City | 40597 Duesseldorf | State | | Zip | | Country | Germany |
| | | | | | | Applicant Authority | |

Name of Additional Joint Inventor, if any:



A petition has been filed for this unsigned inventor

| | | | | | | | |
|----------------------|--|----------------|--|-------------|--|---------------------|--|
| Given Name | | Middle Initial | | Family Name | | Suffix e.g. Jr. | |
| Inventor's Signature | | | | | | Date | |
| Residence: City | | State | | Country | | Citizenship | |
| Post Office Address | | | | | | | |
| Post Office Address | | | | | | | |
| City | | State | | Zip | | Country | |
| | | | | | | Applicant Authority | |

Name of Additional Joint Inventor, if any:



A petition has been filed for this unsigned inventor

| | | | | | | | |
|----------------------|--|----------------|--|-------------|--|---------------------|--|
| Given Name | | Middle Initial | | Family Name | | Suffix e.g. Jr. | |
| Inventor's Signature | | | | | | Date | |
| Residence: City | | State | | Country | | Citizenship | |
| Post Office Address | | | | | | | |
| Post Office Address | | | | | | | |
| City | | State | | Zip | | Country | |
| | | | | | | Applicant Authority | |



Additional inventors are being named on supplemental sheet(s) attached hereto